jeramie Keys



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To:

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From:

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Fax No. 678-565-4749

Date: July 1, 2004

5 pages (including cover)

Application No.: 10/017,586

Message Text:

Transmittal Form Statement under 3.73 Revocation New Power of Attorney Jeramié Keys

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TRANSMITTAL		First Named Inventor	Short et el			
FORM		Art Unit	2844			
(to be used for all correspondence after initia) fi	iling)	Examiner Name				
	1		J. F. Hero	old		
Total Number of Pages in This Submission	4	Attorney Docket Number	20009.0014US01 (BS01-404)			
	ENCL	OSURES (Check all that	( apply)			
Fee Transmittal Form  Fee Attached  Amondment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority  Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts under 37 CFR 1.52 or 1.53	Power of	rawing(s) censing-related Papers exition exition to Convert to a rovisional Application ower of Attorney, Revocation hange of Correspondence Addr cominal Disclairner request for Refund D, Number of CD(s)  (S)  If Attorney and Correspondence ant Under 37 CRF 3.73(b)		Appeor Appeor (Appeor Appeor A	chnologed Compage and Compage Notice retery bus Letter or Enclosed tify below	sure(s) (please
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PTO/SB/96 (08-03)

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STATI	EMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Shannon M. Short et al.	
Application No./Patent No.: 10/017,588	Filed/Issue Date: December 18, 2001
Emitted: Speaker Volume Control for Volce Comm	nunication Device
Bell South Intellectual Property Comoration Name of Assigned)	(Type of Assignme, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. ② the assignee of the entire right, title, and in	nterest; or
<ol> <li>an assignoe of less than the entire right, the extent (by percentage) of its ownersh in the petent application/patent identified above</li> </ol>	by virtue of either:
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B. [ ] A chain of title from the inventor(s), of the below:	patent application/patent identified above, to the current assignee as shown
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	n of title are listed on a supplemental sheet,
[ ] Copies of assignments or other documents [NOTE: A separate copy (i.e., the original of must be submitted to Assignment Division recorded in the records of the USPTO. Se	essignment document or a true copy of the original document,
The undersigned (whose title, is supplied below	v) is authorized to act on behalf of the assignae.
7-1-04	Jeogueline Gregorski
Date 404,249.2790	Typed or printed names
Telephone number	Signature
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Under the Personner's Reduction Act of 1995, no parisons are required to respond to a consistion united it displays a valid OMB control number.

Application Number | 10/017,596 ATTORNEY WITH First Named Inventor Short et al. **NEW POWER OF ATTORNEY** Art Unit 2644 AND Examiner Name J. F. Harold CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number 20009.0014LED1 (BE21-404)

I horeby revoke all previo	us powers of attorney given in the	above-	identified applic	ation.	
A Power of Attorney is	s submitted herewith.		• •		
OR  I hereby appoint the practitioners associated with the Customer Number:					
Please change the co The address ass Customer Numb OR	rrespondence address for the above ociated with er:	-identific	ed application to:		
Firm or Individual Name	171				
Address	P.O. BOX 71356				
Address					
City	Marietta	State	GA	Zip	30007-1355
Country	USA				
Telephone	678-565-4748	Fax	678-565-4749		
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Name Jacqueline Grego	orski, Vice-President - Palent & Trademark P	IOC/III GIT (GIT	t, BellSouth Intellectu:	d Proper	ty Corporation
Signature / WAW	Mre Gugush				
Date / / 2-1-04 / Telephone 404.249.2790					
NOTE: Signature of all the inventors or assigness of record of the entire interest or their representative(s) are required. Submit multiple forms of more than one signature to required, see below.					OPP REFLICTED IN BRITISH C
"Total ofsorr	na are submitted.	•			

This ectiention of information is required by \$7 CFR 1.28. The information is required to obtain or retain a barrefit by this public which is to file (and by the USPTO to process) an application. Confidentiality is governed by \$5 U.S.C. 122 and \$7 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gethesing, preparing, and submitting the completed application form to the USPTO. Tints will vary depending upon the individual case. Any comments on the amount of time you require to complete this form anxier suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient and Trademark Office, U.S. Opportunity of Commissioner, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

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Short et al.

December 18, 2001

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Naturalism Under the Paperwork Reduction Act of 1995, so persons are required to respond to a collection of Inform
Application Number 10/017,588

First Named Inventor

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CORRESPONDENCE ADDRESS	Art Unit		2644
INDICATION FORM	Examiner Name		J. F. Harold
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Practitioner(a) named below:			
Name			Registration Number
·			40,376, 42,724
James D. Withere; Jersmie J. Keys			
Matthew Todd Milcherp			40,731
			36,348
Geoff Sutclife			41,385
Jennifer Mediin as mylour attorney(s) or agent(s) to prosecute the application	on identified above, an	d to brent	sact all business in the United States Patent and
as mylour attorney(s) or agent(s) to protected the depresent of the connected therewith.			
OR  The eddress associated with Customer Number.  OR  Firm or WITHERS & KEYS, LLC			
Individual Name Address P.O. Box 71355			
Address City Manietta		State	Georgia Zip 30007-1355
Country USA Telephone 678-565-4748		Faox	678-565-4749
Applicant/inventor.  Assignee of record of the entire interest. See 37 Statement under 37 CFR 3.73(b) is enclosed. (F	E of Applicant or Ass		
Name Japqueline Gregorski, Vice President Pater	and Trademark Proc	urement	
Signature MACHULINI	zaini.		
Date / 12-1-174/	/		Telephone 404,249.2754
SUPTE: Signatures of all the inventors or assigneds of record of a some if more than one algorithms in required. See below.	n siedt so fawarini eniline en	prosenta	sive(s) are required. Submit multiple
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